Approved for use through 7/3 1/2006, OMB 06610001 PTO/58/06 (12-04)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless a displays a yald OMB pontrol number. U.S. Potent and Trademark Office; U.S. DEPARTMENT OF COMMERCE 2. Substitute for Form PTO-875 19 1894 174 Effective December 8, 2004 APPLICATION AS FILED - PART I (Column 1) OTHER THAN (Column 2) SMALL ENTITY OR SMALL ENTITY HUMBER FILED NUMBER EXTRA BASIC FEE RATE (T) FEE A (37 CFR 1.16(s), (b), or (c)) NA RATE (\$ NA FEE (I) NA SEARCH FEE 150.00 N/À 300.00 17 OFR 116(4), 11. or (m) N/A NA NA **EXAMINATION FEE** \$250 N/A (37 CFR. 1.16(4), (6), or (4)) \$500 NÀ NA AUA. TOTAL CLAME \$100 NIA \$200 (37 CFR 1.16(8) minus 20 = X\$ 25 INDEPENDENT CLAIMS X\$50 OR (37 OFF 1.16(N) a E sunim X100 If the specification and drawings exceed 100 X200 APPLICATION SIZE sheets of paper, the application size fee due Is \$250 (\$125 for small entity) for each (37 CFR 1.16(4)) additional 60 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(J)) +180= +360= ". If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL APPLICATION AS AMENDED - PART II TOTAL (Column 1) (Column 2) (Calumn 3) OTHER THAN OR CLAIMS SMALL ENTITY HIGHEST SMALL ENTITY REMAINING NUMBER PRESENT RATE (1) **AFTER** ADDI-PREVIOUSLY MENDMENT **EXTRA** RATE (S) Total Dr CFR 1/10(II ADDI-PAID FOR TIONAL TIONAL FEE (\$) ENDM Minus FEE (1) X\$ 25 Independent D7 CFR LIGAL X\$50 Minus. OR Œ) X100 Application Size Fee (37 CFR 1.16(s)) X200 OR FIRST PRESENTATION OF MILITIPLE DEPENDENT CLAIM (37 CFR 1.160) +180= +360= OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT AFTER RATE (1) ADOI-PREVIOUSLY EXTRA RATE (1) AMENDMENT TIONAL ADDI-PAID FOR Total profit Litera FEE (3) TIONAL Minus N FEE (1) D D X\$ 25 Independent D7 CFR 1.160 p Minus X\$50 OR ~ X100 Application Size Fee (37 CFR 1.16(s)) X200. OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160) +180= +360= OR TOTAL TOTAL If the entry in column 1 is less than the entry in column 2, write "O" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or independent) is the highest number (ound in the appropriate box in column 1.

Collection of Internation In column In the appropriate box in column 1. ADD'L FEE ADD'L FEE

This colection of information is required by 87 CFR 1.16. The information is required to obtain to retain a benefit by the public which is to life (and by the Justice and Archaeller and socialing gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the Individual case. Any comments on the amount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Depertment of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1450.